

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. APPLICANT(S)	FILING DATE	
						10824852		04-14-04
CLAIMS								
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
	IND	DEP	IND	DEP	IND	DEP		
1	6							
2		1						
3		1						
4		1						
5		1						
6		1						
7		1						
8		1						
9		1						
10		1						
11		1						
12		2						
13		1						
14		1						
15		2						
16		1						
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50								
TOTAL IND.	1							
TOTAL DEP.	18	←	←	←				
TOTAL CLAIMS	19	██████████	██████████	██████████	██████████	██████████	██████████	